For official use only:	
Customer Name	Customer No.

PD F 2778-1 Department of the Treasury Bureau of the Fiscal Service (Revised January 2014)

## **CERTIFICATION ATTACHMENT**

(May be used for up to two additional signatures and certifications)

Attached to and made a part of Form:				
Sign in ink in the pre	sence of an authorized certij	fying officer.		
Sign Here				
(Signature	e)	(Print Name)		
Home Address(Number and Street o	r Dural Douto)	(Social Social	tr. Niveshov)	
(Number and Street o	r Kurai Route)	(Social Securi	ty Number)	
(City) (State)  E-Mail Address	• • • • • • • • • • • • • • • • • • • •		phone Number)	
I CERTIFY that		, whose identity	is known or was	
proven to me, personally appeared before me this	day of	(Month)	, , , (Year)	
at(City) (State)	_ , and signed this form.	(MOHUI)	(real)	
	·			
(OFFICIAL STAMP OR SEAL)	(Signature and title of certifying officer)			
	(Number and Street or Rural Route)			
	(City)	(State)	(ZIP Code)	
Sign in ink in the pre	sence of an authorized certi	fying officer.		
Sign Here(Signature				
(Signature	(Print Name)		ame)	
Home Address(Number and Street o	r Dural Davita	(Social Securi	tr. Niveshov)	
(Number and Street 0	r Kurar Koute)	(Social Securi	ty Number)	
(City) (State)  E-Mail Address	(ZIP Code)	(Daytime Tele	phone Number)	
I CERTIFY that		whose identity	is known or was	
proven to me, personally appeared before me this	day of	,,	, ,	
at	, and signed this form.	(Month)	(Year)	
(City) (State)	_ , and signed this form.			
(OFFICIAL STAMP OR SEAL)	(Signature and title of certifying officer)			
·	(Number and Street or Rural Route)			